

## Temporary Event & Vendor Permit Application

**YOU ARE HEREBY NOTIFIED THAT A TEMPORARY EVENT OR VENDOR MUST  
OBTAIN A PERMIT BEFORE OPERATING UPON THE PREMISES AT**

ADDRESS OF PROPERTY \_\_\_\_\_

**In Franklin Park, Illinois 60131.**

Applications for Temporary Event & Vendor Permits shall be obtained at the Building Department, 9500 Belmont Avenue, Franklin Park, Illinois, Second Floor. The packet must be filled out completely and returned to the Building Department in a timely manner. The application must be processed by both the Building Department and Zoning Department. You will be contacted by Village staff when your application has been reviewed.

The enclosed forms have been prepared to collect vital information needed by the Fire, Police, Health, Zoning, and Building Departments. The information will be used in normal daily operations and during emergencies. Information changed should be reported to the building administrator by calling (847) 671-8245.

Below is a checklist of items needed to submit a valid application:

COMPLETED APPLICATION PACKET

EVENT OR VENDOR USE LETTER *(SEE LAST PAGE FOR INSTRUCTIONS)*

SITE MANAGEMENT PLAN *(IF REQUIRED, SEE LAST PAGE FOR INSTRUCTIONS)*

HAS REVIEWED ILLINOIS DEPARTMENT OF PUBLIC HEALTH GUIDELINES FOR FAIRS AND TEMPORARY FOOD SERVICE ESTABLISHMENTS *(IF PREPARING, COOKING, SELLING, OR SERVING FOOD OR BEVERAGES)*

### OFFICE USE ONLY

ZONING REVIEW \_\_\_\_\_ DATE \_\_\_\_\_ ZONING DISTRICT \_\_\_\_\_  
*IF REQUIRED*

BUILDING REVIEW \_\_\_\_\_ DATE \_\_\_\_\_ VALID PERMIT DATE \_\_\_\_\_

COMMENTS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLEASE NOTE: Applications with missing information WILL NOT be accepted and WILL NOT initiate the application process. Any false, misleading or material omission of information shall subject any license or permit issued as a result of this application to be subject to revocation.**

**APPLICANT INFORMATION**

COMMUNITY EVENT \_\_\_\_\_  
ADDRESS OF EVENT \_\_\_\_\_  
NAME OF APPLICANT \_\_\_\_\_  
APPLICANT TYPE          INDIVIDUAL          PARTNERSHIP          CORPORATION          OTHER \_\_\_\_\_  
APPLICANT PHONE \_\_\_\_\_ APPLICANT EMAIL \_\_\_\_\_  
APPLICANT ADDRESS \_\_\_\_\_  
NAME OF PERSON TO CONTACT \_\_\_\_\_  
PERSON TO CONTACT PHONE (OFFICE) \_\_\_\_\_ (CELL) \_\_\_\_\_

**EMERGENCY CONTACT**

This information will be used by the Fire and Police Departments in case of emergency

EMERGENCY CONTACT NAME 1 \_\_\_\_\_  
EMERGENCY PHONE (OFFICE) \_\_\_\_\_ (CELL) \_\_\_\_\_  
EMERGENCY CONTACT EMAIL \_\_\_\_\_  
EMERGENCY CONTACT NAME 2 \_\_\_\_\_  
EMERGENCY PHONE (OFFICE) \_\_\_\_\_ (CELL) \_\_\_\_\_  
EMERGENCY CONTACT EMAIL \_\_\_\_\_

**PROPERTY OWNER CONTACT**

NAME OF CURRENT BUILDING OWNER \_\_\_\_\_  
CURRENT OWNER'S ADDRESS \_\_\_\_\_  
CURRENT OWNER'S PHONE (OFFICE) \_\_\_\_\_ (CELL) \_\_\_\_\_  
CURRENT OWNER'S EMAIL \_\_\_\_\_

**VENDOR CERTIFICATIONS**

**If food is present, an IDHP Food Service Sanitation certified employee must be on-site at all times**

CERTIFIED EMPLOYEE #1 NAME \_\_\_\_\_ DATE OF ISSUANCE \_\_\_\_\_  
CERTIFICATION NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_  
CERTIFIED EMPLOYEE #2 NAME \_\_\_\_\_ DATE OF ISSUANCE \_\_\_\_\_  
CERTIFICATION NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_



**EVENT OR VENDOR LETTER INSTRUCTIONS**

Please provide a EVENT OR VENDOR LETTER that includes the following:

- Detailed description of operations and background
- Reason for locating in Franklin Park
- Manager, owner or person of responsibility contact
- Business/Organization marketing packet (if available)

ADDRESS TO: Nicholas Walny  
 Zoning Administrator  
 Village of Franklin Park  
 9500 W Belmont  
 Franklin Park, IL 60131

Event or Vendor letter must be TYPED\* using company letterhead or logo.

\*If you do not have access to a personal computer to type a commercial use letter, free computer use is provided at the Franklin Park Public Library located at 10311 Grand Ave, Franklin Park, IL 60131.

**SITE MANAGEMENT PLAN INSTRUCTIONS**

Please provide a scaled SITE MANAGEMENT PLAN based on a plat of survey. This should include the following:

**Site Plan**

- Proposed outdoor structure and operation locations
- Addresses, unit/suite numbers, legend and scale
- Indicate crowd control and security measures
- Indicate where people will park or access site
- Indicate closed roads, driveways, or parking areas

**Food Service**

- Indicate size and location of kitchen, food trucks food storage, preparation, or service stations
- Indicate location and number of seats, tables, fixtures, or amenities in which customers will utilize, if applicable
- Indicate food disposal, trash, and recycling receptacles

**APPLICANT CERTIFICATION**

*I certify that the information provided in this application is true and correct to the best of my knowledge and agree that I have a continuing obligation to inform the Village if there is a change in circumstances.*

\_\_\_\_\_  
 INITIAL

*I certify that I will complete all work required by the Zoning and Building Departments before occupying the site and obtain all necessary permits for work I will undertake.*

\_\_\_\_\_  
 INITIAL

*I certify I have read, understand, and agree to follow all Illinois Department of Public Health guidelines for fairs and temporary food establishments if preparing, cooking, selling, or serving on site.*

\_\_\_\_\_  
 INITIAL

*I certify that I will obtain a Temporary Event & Vendor Permit Application before occupying the site.*

\_\_\_\_\_  
 INITIAL

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

NAME OF APPLICANT \_\_\_\_\_

SUBSCRIBED AND SWORN BEFORE ME ON THIS \_\_\_\_\_ DAY OF

\_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
 NOTARY PUBLIC

